

EMERGENCY DEPARTMENT AND URGENT CARE VISITS FOR HEAT-RELATED ILLNESS IN VIRGINIA

July 19-21, 2019

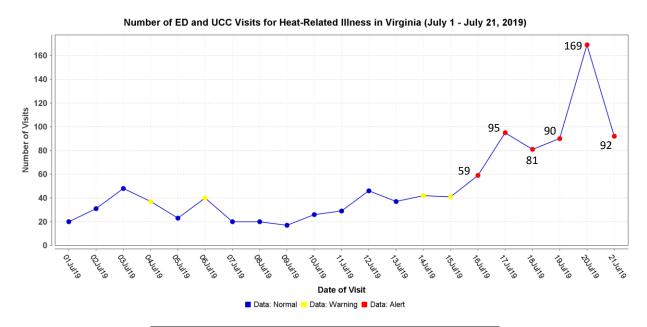
Background

At the time of this report, the Virginia Department of Health (VDH) received data on visits to 85 acute care hospital emergency departments (EDs), 19 free-standing EDs, and 45 urgent care centers (UCCs) in Virginia for purposes of public health surveillance. This report characterizes ED and UCC visit trends for heat-related illness.

See page 3 for data sources and case definitions used in this report.

Data Summary

A total of **351 ED and UCC visits for heat-related illness** occurred between July 19-21, with 8% admitted to the hospital. The graph below displays the daily number of heat-related visits in Virginia between July 1 and July 21, 2019.

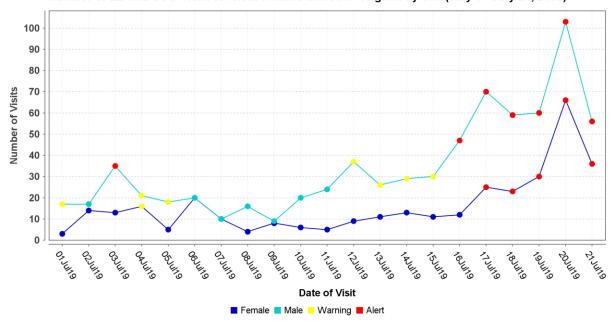


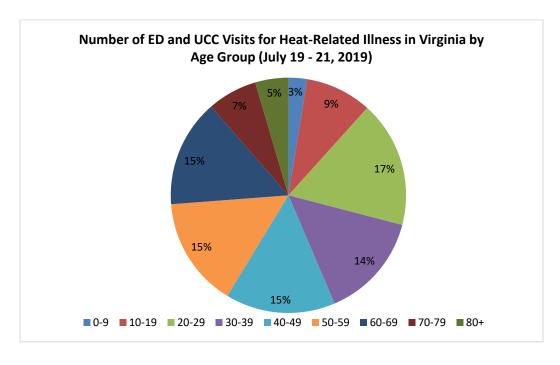
Number of ED and UCC Visits for Heat-Related Illness in Virginia by Discharge Type (July 19-21, 2019)	
Discharge Type	Number of Visits (%)
Admitted	29 (8%)
Deceased	0 (0%)
Discharged to Home	248 (71%)
Not Reported	69 (20%)



Both males and females displayed a significant increase in heat-related visits but **males** accounted for **62%** (N=219) of visits between July 19th-21st. The largest proportion of visits by age were among patients **20-29 years old** (17%, N=61) followed by a similar occurrence among 30-39 (14%), 40-49 (15%), 50-59 (15%), and 60-69 year olds (15%). The graphs below show ED and UCC heat-related illness visits in Virginia by sex and age group.

Number of ED and UCC Visits for Heat-Related Illness in Virginia by Sex (July 1 - July 21, 2019)



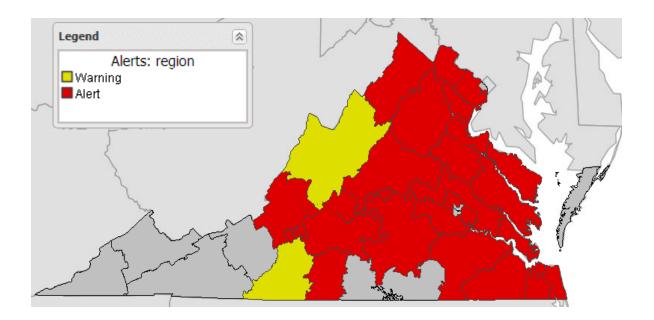


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The map below displays <u>VDH Health Districts</u> with significant increases in heat-related visits on July 19-21 compared to baseline levels. **27 VDH Health Districts** (out of 35) experienced elevated levels for heat-related illness (red alerts: p-value < 0.01; yellow warning: p-value < 0.05).

Health Districts with elevated visits include: Alleghany, Alexandria, Central Shenandoah, Central Virginia, Chesterfield, Chesapeake, Chickahominy, Crater, Fairfax, Hampton, Henrico, Lord Fairfax, Loudon, Norfolk, Peninsula, Piedmont, Pittsylvania-Danville, Portsmouth, Prince William, Rappahannock, Rappahannock Rapidan, Roanoake City, Thomas Jefferson, Three Rivers, Virginia Beach, West Piedmont, Western Tidewater



Data Sources

VDH analyzes chief complaints and discharge diagnoses of ED and UCC visits to identify and monitor issues of public health concern across Virginia. The chief complaint is a free-text field capturing the patient's primary reason for seeking medical care as interpreted by the ED registration staff. The discharge diagnosis is a coded field that uses standardized values outlined by the International Classification of Diseases (ICD) 10th Revision and SNOMED Clinical Terms (CT) code sets. Readers are strongly encouraged to review <u>syndromic surveillance data limitations</u> when interpreting this report.

Case Definitions

ED and UCC visits for **heat-related illness** were identified based on the <u>Heat-Related Illness Syndrome</u> <u>Query</u> definition published by the Council of State and Territorial Epidemiologists (CSTE) using the following terms for Chief Complaint and Discharge Diagnosis: *heat exhaustion; heat exposure; heat cramps; heat stroke; hyperthermia;* ICD-10 codes: *T67, X30.;* and SNOMED CT codes: *95868006, 95867001.*